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FOR MARKET USE ONLY

**APPLICATION FORM
 SPRINGS FARMERS MARKET
 MAY 25TH - SEPT 21ST 2024
 (PLEASE PRINT AND PROVIDE FULL MAILING ADDRESS)**

NAME _____ **PHONE** _____

ADDRESS _____

CITY/STATE _____ **ZIP** _____

PLEASE CHECK THE ITEMS YOU PLAN TO SELL:

- | | | |
|------------------------|----------------|--|
| _____ vegetables | _____ eggs | _____ honey/jams/preserves |
| _____ plants/flowers | _____ fruits | _____ tools |
| _____ baked goods | _____ antiques | _____ used furniture/clothes/treasures |
| _____ crafts.(specify) | _____ quilts | _____ other _____ |

PLEASE CHECK ONE OF THE FOLLOWING:

- I desire _____ seasonal space(s). A fee of \$154.00 per space requested is enclosed(not refundable)
- I prefer to pay \$12.00 weekly per space and need _____ spaces. Please indicate date you will be selling.

PLEASE CHECK ONE OF THE FOLLOWING:

- I wish to sell from my vehicle in an uncovered space(s)
- I wish to sell from a covered space with a table provided by the market.

**RETURN APPLICATION TO: JIM GREEN
 SPRINGS FARMERS MARKET
 488 LAKE SHORE RD.
 FORT HILL, PA 15540**

MAKE CHECKS PAYABLE TO: THE SPRINGS HISTORICAL SOCIETY

for more information or to answer questions call:

**MANAGER
 JIM GREEN
 240-310-2086**

The undersigned hereby agrees to indemnify and hold harmless the Springs Historical Society from any loss, liability or claim arising from any acts or omissions of the undersigned, his employees, agents, guests, or invitees which are in any way related to the activities contemplated by this agreement, including reasonable attorney's fees. Furthermore, I understand that the Springs Historical Society retains the right to limit the sale of goods deemed inappropriate, unsafe, or unsanitary. I understand that I have full responsibility and liability for my displays and products as well as compliance with applicable Pennsylvania Laws to include Sales Tax Laws.

SIGNATURE _____ **DATE** _____